United States Marshals Service -00050-PMP -RJJ Document help the first help to the f

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PLAINTIFF			FARTH TOTAL ON			COURT CASE NUMB	ER			
Righthaven LLC		The first of the second			(1)	2:11-cv-00050				
DEFENDANT	DEFENDANT					TYPE OF PROCESS				
Wayne Hoehr	1	IAME OF INDIVIDUAL COMPANY CORPORATION FOR TO STRIPL OF DES				Writ of Execution				
NAME OF INDIVIDUAL, COMPANY, CORPORATION. ETC. TO SERVE OR DESCRIPTION OF PRO										
CEDATE	1						JUILL	IK CONDLININ		
SERVE		erve: Bank of Nevada; Seize: Operating Account of Righthaven LLC, Acct. # 7501426651 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)								
AT		-	•	Coae)	117					
	7251 W. Lake Me			•						
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW						Number of process to be				
					served with this Form 285		1			
J. Malcolm DeVoy IV Randazza Legal Group										
		Number of parties to be served in this case		1						
	25 W. Warm Springs s Vegas, NV 89118	s Road, Suite 100			Served in this case					
1		Check for service								
				on U.S.A.		J. S.A .	n/a			
COCCUAT INCOM	THEOTICAL OF COMME	DEAD	* A CT TX TX X							
All Telephone N	RUCTIONS OR OTHER Vumbers, and Estimated	CINFORMATION TE Times Available for S	IAT WILL ASSIST	IN EXPEDITING SE	ERVICE (Include Business and A	<u>lternate A</u>	ddresses.		
ď	······							Fold		
Seize all ass	ets in bank account	number 75014266	551, the Rightha	ven LLC operation	g accol	int, and any other h	ank acco			
Seize all assets in bank account number 7501426651, the Righthaven LLC operating account, and any other bank accounts belonging to Righthaven LLC. Bank of Nevada is open from 9 am to 5 pm. The phone number for this Bank of Nevada										
location is (7	702) 240-1734.		-	-						
_										
Signature of Attorney other Originator requesting service on behalf of: PLAINTIFF					TELEPHONE NUMBER		DATE			
DEFENDANT							11.00.00.11			
C june	1 mm Vel	N TIP				57-1113 ex. 4	11/3/2			
SPACE B	ELOW FOR U	SE'OF U.S. M	ARSHAL O	NLY DO NO	TC W	RITE BELOW	THIS	LINE		
I acknowledge receipt for the total Total Process District of District to Signature of Authorized USMS Deputy or Clerk Date										
number of process indicated. Origin Serve					novo como populy or com		Ī			
	ign only for USM 285 if more an one USM 285 is submitted)				mo	u N		1141		
thereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described										
I hereby certify as	nd return that I 🔛 have	personally served ,	have legal evidenc	e of service, Q have	executed	l as shown in "Remarks"	, the proce	ess described		
on the individual	, company, corporation, e	sic., at the address sho	wa above on the on	the individual, compa	any, corp	oration, etc. shown at the	address i	nserted below.		
I hereby certi	ify and return that I am u	nable to locate the ind	ividual, company, c	orporation, etc. named	d above (.	See remarks below)				
	individual served (if not					A person of suita	ble age an	d discretion		
Cuarting Wilkerson - Done Long Manager							_	usual place		
Address (complete only different than shown above) On the Time										
Address (complete	e onty aifferent than shov	vn above)				Date	Time	_ D an		
						1108/11	llah	<i>O</i> ∑ pn		
Signature of U.S. Marshal or Deputy										
						Organization C. G. Was	Fine Di	300m		
Service Fee	Total Miles Ch	[l m	1	T .					
service ree	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)					
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					"					
REMARKS:	# 5 ob 1 - 11-	117 0	······································							
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111/4-	1 mules 1	fandtig)	5.4554 A 5.464	<u> </u>					
PRINT 5 COPIE	1. CLERK OF THE 2. USMS RECORD	COURT	/			PRIOR E	DITIONS	MAY BE USEI		

- 3. NOTICE OF SERVICE
- BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT